

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ▼

1600 EYE STREET NW

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20006

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00139519

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☒ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
09 01 2015

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Anna Henderson

Signature of Treasurer

Anna Henderson

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
01 07 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
09 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y  
09 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2015</span>		<span style="border: 1px solid black; padding: 2px;">16336.88</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">30739.79</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">6624.71</span>	<span style="border: 1px solid black; padding: 2px;">74141.68</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">37364.50</span>	<span style="border: 1px solid black; padding: 2px;">90478.56</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">5053.00</span>	<span style="border: 1px solid black; padding: 2px;">58167.06</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">32311.50</span>	<span style="border: 1px solid black; padding: 2px;">32311.50</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y Y  
09 01 2015

To:

M M / D D / Y Y Y Y Y Y  
09 30 2015

**I. Receipts**

**COLUMN A**  
**Total This Period**

**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1624.71

32521.06

(ii) Unitemized .....

0

11620.62

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

1624.71

44141.68

(b) Political Party Committees .....

0

0

(c) Other Political Committees

(such as PACs).....

5000.00

30000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

6624.71

74141.68

## 12. Transfers From Affiliated/Other

Party Committees.....

0

0

## 13. All Loans Received .....

0

0

## 14. Loan Repayments Received.....

0

0

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0

0

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0

0

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0

0

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5) .....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

6624.71

74141.68

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

6624.71

74141.68

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	53.00	159.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	53.00	159.00
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	57008.06
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	1000.00
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	1000.00
29. Other Disbursements .....	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5053.00	58167.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5053.00	58167.06

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	6624.71	74141.68
34. Total Contribution Refunds (from Line 28(d)) .....	0	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6624.71	73141.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	53.00	159.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	53.00	159.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 12

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Anissa Brennan**

Mailing Address 1600 I Street NW

City  
Washington

State Zip Code  
DC 20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Motion Picture Association of America

Occupation  
Vice President, Trade Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1328.00

Date of Receipt

09 / 16 / 2015

**Transaction ID : 803-P171**

Amount of Each Receipt this Period

166.00

Payroll Deduction

(\$166.00 Monthly)

Full Name (Last, First, Middle Initial)

**B. Marilyn Gordon**

Mailing Address 5507 Fairgrange Dr

City  
Agoura Hills

State Zip Code  
CA 91301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Motion Picture Assoc of Americ

Occupation  
Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

09 / 16 / 2015

**Transaction ID : 803-P174**

Amount of Each Receipt this Period

209.00

Payroll Deduction

(\$209.00 Monthly)

Full Name (Last, First, Middle Initial)

**C. Kathy Grant**

Mailing Address 1600 Eye Street, NW

City  
Washington

State Zip Code  
DC 20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MPAA

Occupation  
Senior VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.28

Date of Receipt

09 / 16 / 2015

**Transaction ID : 803-P172**

Amount of Each Receipt this Period

90.91

Payroll Deduction

(\$90.91 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

465.91

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 12

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Patrick Kilcur**

Mailing Address 1534 8th Street NW

City  
Washington

State Zip Code  
DC 20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Motion Picture Association of America

Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1672.00

Date of Receipt

09 / 16 / 2015

**Transaction ID : 803-P173**

Amount of Each Receipt this Period

209.00

Payroll Deduction

(\$209.00 Monthly)

Full Name (Last, First, Middle Initial)

**B. Pearl Lee**

Mailing Address 15301 Ventura Boulevard Bldg E

City  
Sherman Oaks

State Zip Code  
CA 91403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MPAA

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

09 / 16 / 2015

**Transaction ID : 803-P180**

Amount of Each Receipt this Period

42.00

Payroll Deduction

(\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

**C. Dean Marks**

Mailing Address 3914 Kingswood Rd

City  
Sherman Oaks

State Zip Code  
CA 91403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MPAA

Occupation  
EVP, Deputy General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3336.00

Date of Receipt

09 / 16 / 2015

**Transaction ID : 803-P179**

Amount of Each Receipt this Period

417.00

Payroll Deduction

(\$417.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

668.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 8 OF 12

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Orit Michiel**

Mailing Address 15301 Ventura Blvd Bldg E

City

Sherman Oaks

State

CA

Zip Code

91403-5885

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MPAA, Inc

Occupation

Attorney

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2015

**Transaction ID : 803-P175**

Amount of Each Receipt this Period

100.00

Payroll Deduction

(\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

**B. Greg Saphier**

Mailing Address 3210 Glenwood Place

City

Falls Church

State

VA

Zip Code

22041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Motino Picture Association of America

Occupation

Director External Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1454.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2015

**Transaction ID : 803-P176**

Amount of Each Receipt this Period

181.80

Payroll Deduction

(\$181.80 Monthly)

Full Name (Last, First, Middle Initial)

**C. Benjamin Staub**

Mailing Address 1600 I Street NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Motion Picture Association of America

Occupation

Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

672.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2015

**Transaction ID : 803-P177**

Amount of Each Receipt this Period

84.00

Payroll Deduction

(\$84.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

365.80

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 12

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Karen Thorland**

Mailing Address 15301 Ventura Blvd Bldg E

City

Sherman Oaks

State

CA

Zip Code

91403-5885

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MPAA, Inc

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 16 / 2015

**Transaction ID : 803-P178**

Amount of Each Receipt this Period

125.00

Payroll Deduction

(\$125.00 Monthly)

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

1624.71

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 12

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. VIACOM INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1501 M STREET, SUITE 1100  
 SUITE 1100

City State Zip Code  
 WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00167759

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**09** / **09** / **2015**

**Transaction ID : 801**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5000.00

5000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PNC Bank**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2015

Mailing Address 4242 Carlisle Pike

City	State	Zip Code
Camp Hill	PA	17011

**Transaction ID : 808**Purpose of Disbursement  
Banking Fee

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

53.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

53.00
53.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SCHIFF FOR CONGRESS (P)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2015

Mailing Address 777 S. FIGUEROA ST., STE. 4050

City	State	Zip Code
LOS ANGELES	CA	90017

**Transaction ID : 806**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**ADAM SCHIFF**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: CA	District: 28

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Amount of Each Disbursement this Period
2000.00

Full Name (Last, First, Middle Initial)

**B. TEXANS FOR LAMAR SMITH (P)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2015

Mailing Address PO BOX 6155

City	State	Zip Code
SAN ANTONIO	TX	78209

**Transaction ID : 807**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**LAMAR SMITH**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: TX	District: 21

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Amount of Each Disbursement this Period
1000.00

Full Name (Last, First, Middle Initial)

**C. WALDEN FOR CONGRESS (P)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2015

Mailing Address PO BOX 1091

City	State	Zip Code
HOOD RIVER	OR	97031

**Transaction ID : 800**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**GREGORY P MR. WALDEN**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: OR	District: 02

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Amount of Each Disbursement this Period
2000.00

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

5000.00